Cigarette Consumption

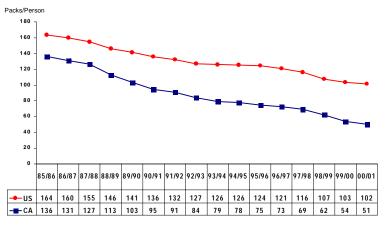
S ince 1988, per capita cigarette consumption in California has declined by 60%. During the same period, per capita cigarette consumption in the entire nation (including California) declined by 34%. The greater decline in California is a result of activities of the California Tobacco Control Program along with increases in the cigarette tax and the higher price of cigarettes in California.

This cigarette consumption data is based on tax receipts paid to the state of California, and does not include cigarettes purchased from another state via mail order or Internet, or cigarettes purchased on an Indian reservation or a military commissary or base exchange. Such legal, non-taxed sales are estimated to account for less than 5.1% of all cigarette consumption in California.² The amount of cigarettes brought into California by illegal smuggling is believed to be much less.^{3,4}

Cigarette Consumption

- Declines in average daily cigarette consumption reported by current smokers appear to be causing the dramatic declines in per capita cigarette consumption in California.
- The decrease in average reported daily cigarette consumption is seen across gender and race groups.
- Average daily cigarette consumption reported by everyday smokers was 18.0 cigarettes per day in 1994. This decreased steadily to 15.1 cigarettes per day in 2001. This is a decrease of 16% over the six-year period.
- A decrease in consumption has been shown to lead to short-term health benefits that include significant reductions in the incidence of heart disease, lung cancer and total mortality.^{5, 6}

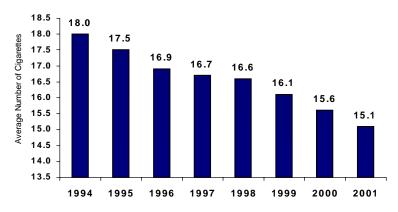
California and US Adult per Capita Cigarette Consumption, Packs per Fiscal Year, 1983/1984-2000/2001



Source: California State Board of Equalization (packs sold) and California Department of Finance (population). U.S. Department of Agriculture.

Note that CA data is by fiscal year (July 1 - June 30) and US data is by calendar year. Prepared by: California Department of Health Services. Tobacco Control Section, 2002

Average Number of Cigarettes Smoked per Day by Everyday Smokers in California, 1994-2001



Source: CATS/BRFS 1994 - 2001 is weighted to the 1990 California population.

Prepared by: California Department of Health Services, Tobacco Control Section, 2002.

Average Number of Cigarettes Smoked per Day by Smoke-Free Policy, 1999 16 13.9 Average Number of Cigarettes 14 11.2 12 10 8.2 7.3 2 None Work Smoke-Both Home Smoke-Free Policy Free Policy Source: CTS Adult Extended Survey 1999 is weighted to the 1996 California population. Prepared by: California Department of Health Services, Tobacco Control Section, 2001.

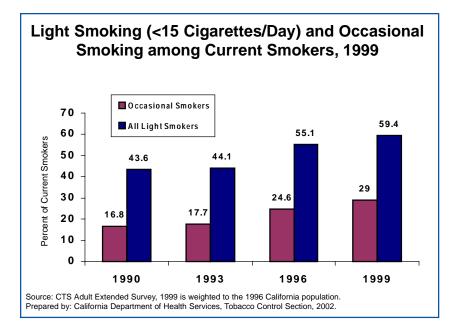
Smoke-Free Policy

 California smokers who report a lower average daily consumption of cigarettes are more likely to have a smoke-free work place and/or a smoke-free home.

About the Surveys

The Behavioral Risk Factor Survey (1984-present) and The California Adult Tobacco Survey (1993-present) are random digit-dial telephone surveys of 8,000 adults conducted annually, by the Computer Assisted Telephone Interviewing (CATI) Unit of the Cancer Surveillance Section of the CDHS. Data have been weighted to the 1990 California population using gender, 4 race and 2 age groups.

The California Tobacco Surveys (CTS) (1990, 1992-1993, 1996, 1999), funded by the Tobacco Control Section of the CDHS, were conducted by the Cancer Prevention and Control Program of the University of California, San Diego. The California Tobacco Survey is a very large-scale telephone survey that includes a screener survey, an adult extended survey and a youth survey.



Light and Occasional Smoking

The proportion of current smokers who are light or non-daily smokers has steadily increased in California.

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- 3 Yurekli AA, Zhang P. The impact of the clean indoor-air laws and cigarette smuggling on demand for cigarettes: an empirical model. Health Econ. 2000; 9: 159-70.
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- 5 Fichtenberg CM, Glantz SA. Association of the California Tobacco Control Program with declines in cigarette consumption mortality from heart disease. N Engl J Med. 2001; 343(23): 1797-8.
- 6 Moore MJ. Death and Tobacco Taxes. Rand J of Econ. 1996; 27(2): 215-248.

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